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| **Formal Flexible Working into Retirement Request Form (Change to working arrangements)**Please refer to the University’s Flexible Working into Retirement Policy prior to completion.Ensure you have taken the necessary advice in relation to your financial implications and / or impact on state benefits.To consider which working pattern will help you balance commitments outside of work with contractual duties and responsibilities.Consider any effects a change in working pattern may have on your department / institution, together with how these may be accommodated.  |
| **Name** |  | **Job Title** |  |
| **Department**  |  | **Line Manager** |  |
| **Employee Number** |  |

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| **PART 1: To be completed by the member of staff** |
| **Qualifying Criteria:** |
| **I would like to make a formal flexible working into retirement request hereby confirm that:** | **Tick** |
| I am over 55 years and have at least 2 years continuous service | [ ]  |
| I have not made a request for flexible working into retirement in the past 12 months/last academic year. | [ ]  |

**Current Working Pattern. 1 FTE is equivalent to 37 hours per week**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day** | **Start Time** | **Break/Lunch Time** | **Finish Time** | **Hours Worked** | **Place of Work**  |
| Monday |  |  |  |  |  |
| Tuesday |  |  |  |  |  |
| Wednesday |  |  |  |  |  |
| Thursday |  |  |  |  |  |
| Friday |  |  |  |  |  |
| Total FTE |  |

**Flexible retirement changes to FTE**

|  |  |  |
| --- | --- | --- |
| **Effective date of change** | **FTE** | **Comments** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Final Retirement Date | 0 FTE |  |

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| **Details of alternative availability or flexibility for request if preferred working pattern cannot be accommodated:** |
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| **Additional Information to support application:**  |
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| **If this is accepted by my Line Manager I would like to this new working arrangement to commence on:** |
| **Date** |  |

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| **Personal Declaration** |
| * I confirm I have read and understood the University’s Flexible Working intoRetirement Policy.
* (If applicable) I confirm that the conditions of my visa do not prevent me from making a permanent change to my employment.
* I confirm I have considered the impact of any adjustments which will be made to my salary to reflect this change in working pattern and I am aware that this change will be permanent.
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| **Signature** |  |
| **Date** |  |

**Please send completed form to your Line Manager for consideration.**

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| **PART 2: To be completed by the Line Manager**  |
| **SECTION A: REQUEST APPROVED.**  |
| **FORMAL ARRANGEMENTS:****I confirm my approval of the change requested:** |
| *Please provide details of the change agreed and the date in which it should take effect. Please provide any discussion comments and supporting information for this request:* |

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| **SECTION B: REQUEST DECLINED** |
| **I confirm that I am unable to reach agreement in relation to the employee’s request for flexible working into retirement arrangements:** |
| *Please provide details of relevant and supporting information relating to reasons for declining this request:* |
| **Reason for declining request** | **Tick** |
| Detrimental effect on ability to meet customer and/or student demand | **[ ]**  |
| Inability to reorganise work amongst existing staff | **[ ]**  |
| Inability to recruit additional staff | **[ ]**  |
| Detrimental impact on quality | **[ ]**  |
| Detrimental impact on performance | **[ ]**  |
| Insufficiency of work during the periods the employee proposes to work | **[ ]**  |
| Planned structural changes | **[ ]**  |

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| **Manager Declaration** |
| **I confirm I have considered this request in line with the University’s Flexible Working into Retirement Policy.** |
| **Signature** |  |
| **Date** |  |

**Please send completed form to your Department of People, Performance and Culture Business Advisor and provide the employee with a copy.**

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| **Amendment to Contract Request Form – Flexible Working into Retirement**  | General Black Portrait |
| **Please remember to only use this form to make amendments for flexible working into retirement.** |

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| **1. CONTRACT DETAILS** |
|  |
| Name of Employee |  | Post Ref |  |  |
|  |
| School/Department |  |  |
|  |
| Job Title | ----------------------------------------------- |  |
| Job Family [ ]  Academic [ ]  Professional Services [ ]  Research [ ]  Technical [ ]  ManualAcademic Job Type [ ]  Teaching & Research [ ]  Teaching Scholarly & Professional Practice [ ]  Research only  |

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| **2. Change to FTE** |
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| Effective date of change | FTE |
|  |  |
|  |  |
|  |  |
|  |  |
|  | 0 FTE |

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| **3. FORM COMPLETED BY** |
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|  |
| Name |  | School/Department |  |  |
|  |
| Job Title |  |  Date of Request |  |  |
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| **4. AUTHORISATION** |
| **Head of College/Head of School/Head of Department** |
| Name |  | Date |  |  |
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***Department of PPC – Please detach this form from the main ‘Flexible Working into Retirement Request’ before forwarding to Finance for approval.***

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| **DEPARTMENT OF PPC AUTHORISATION** |
| **Business Partner** |
| Name |  | Date |  |  |
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|  |
| **FINANCE AUTHORISATION** |
| **Finance** |
| Name |  | Date |  |  |
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